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AF

PATENT  
6012-1001

IN THE U.S. PATENT AND TRADEMARK OFFICE

In re application of

Nicolaas Laurisse SIELING Conf. 1275  
Application No. 10/509,098 Group 3671  
Filed: September 27, 2004 Examiner Examiner Toni Newville  
TITLE: GROUND LEVELLING APPARATUS

**LETTER SUBMITTING  
SUPPLEMENTAL APPLICATION DATA SHEET**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

August 2, 2006

Sir:

We enclose herewith the substitute Application Data Sheet (ADS), changing the attorney docket number from "6001-1005" to 6012-1001. No new matter is added.

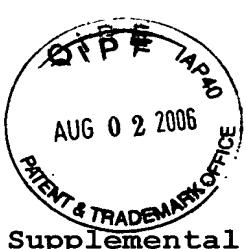
Respectfully submitted,

YOUNG & THOMPSON

By

  
Robert J. Patch, #17,355  
Attorney for the Applicant  
745 South 23<sup>rd</sup> Street, Suite 200  
Arlington, Virginia 22202  
(703) 521-2297

RJP:jlw



## Supplemental Application Data Sheet

### **Application Information**

Application Type:: Regular  
Subject Matter:: Utility  
Suggested Classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R?:: None  
Number of CD disks::  
Number of Copies of CDs::  
Sequence Submission?:: None  
Computer Readable Form (CRF):: No  
Number of copies of CRF:: 0  
Title:: GROUND LEVELLING APPARATUS  
Attorney Docket Number:: ~~6001-1005~~ **6012-1001**  
Request for Early Publication?:: No  
Request for Non-Publication?:: No  
Suggested Drawing Figure::  
Total Drawing Sheets:: 5  
Small Entity?:: Yes  
Latin Name::  
Variety Denomination Name::  
Petition Included?:: No  
Petition Type::  
Licensed US Gov't Agency::  
Contract or Grant Numbers::  
Secrecy Order in Parent Appl.?:: No

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: NEW ZEALAND  
Status:: Full Capacity  
Given Name:: NICOLAAS  
Middle Name:: LAURISSE  
Family Name:: SIELING  
Name Suffix::  
City of Residence:: MULWALA  
State or Province of Residence::  
Country of Residence:: AUSTRALIA  
Street of Mailing Address:: MURRAY-GWYNNE FARM  
Address:: THE COACH ROAD, NEW SOUTH WALES  
City of Mailing Address:: MULWALA  
State or Province of Mailing Address::  
Country of Mailing Address:: AUSTRALIA  
Postal or Zip Code of Mailing Address:: 2647

**Correspondence Information**

Correspondence Customer 000466  
Number::

**Representative Information**

Representative Customer	000466
Number::	

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/AU03/00374	3/21/03

**Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
AUSTRALIA	PS 1294	3/25/02	Yes

**Assignment Information**

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::